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November 13, 2003

GROUP: 1635

FAX NUMBER: 1-703-872-9306

ATTORNEY DOCKET NO.: RTS-0139

SERIAL NO.: 10/035,485

FILED: October 17, 2001

NUMBER OF PAGES: 13
(including this sheet)

MESSAGE: Attached is an Amendment Transmittal Letter (in duplicate) and
Amendment in Response to Office Action dated September 5, 2003.

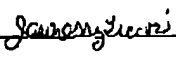
URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!

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AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. RTS-0139		
Applicant(s): Baker and Cowser					
Serial No. 10/035,485	Filing Date October 17, 2001	Examiner Janet L. Epps Ford	Group Art Unit 1614		
Invention: ANTISENSE MODULATION OF MATRIX METALLOPROTEINASE 1 EXPRESSION					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: November 13, 2003</div></div> <div style="margin-top: 20px;"><div style="display: flex; justify-content: space-between;"><div> _____ Signature Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454</div><div style="border: 1px solid black; padding: 5px; width: 30%; text-align: center;"><div style="font-size: small;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="margin-top: 10px;">_____ Signature of Person Mailing Correspondence</div><div style="margin-top: 10px;">_____ Typed or Printed Name of Person Mailing Correspondence</div></div></div><div style="margin-top: 20px;">cc:</div></div>					

[illegible]